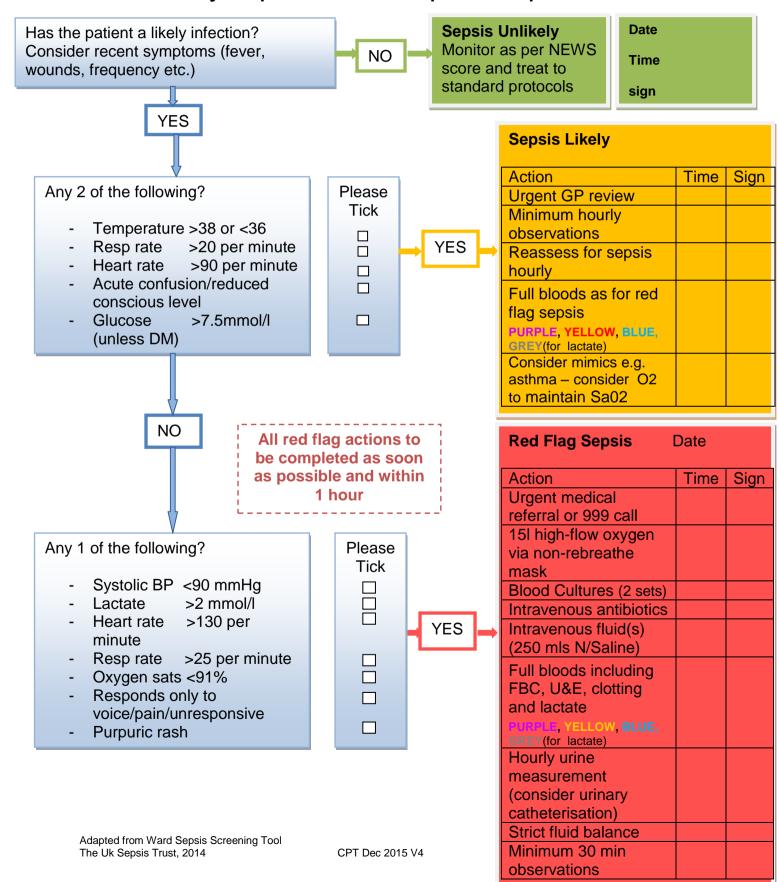
Patient Name
Ward
NHS number



## Adult Surviving Sepsis Proforma: Community Hospital and Older People's MH Inpatient Areas



## **Notes**

Date/Time	Comments/Actions	Signature
	1	